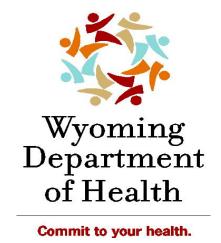
Public Health Emergency Preparedness Program

Annual Summary Report



2010-2011

PUBLIC HEALTH EMERGENCY PREPAREDNESS PROGRAM

The Public Health Emergency Preparedness Program contributes to the quality of life in Wyoming by upgrading and integrating State, Tribal and Local Jurisdictions' public health preparedness for, response to and recovery from all hazards emergencies.

The Wyoming Department of Health (WDH), Public Health Emergency Preparedness Program (PHEP) receives funding annually through a cooperative agreement from the Centers for Disease Control and Prevention (CDC) to support all hazards public health emergency preparedness by state, local and tribal public health agencies and partners. This is the second annual report prepared by the PHEP Program to summarize activities conducted with the CDC funding. The budget year of 2009-2010 was the final year of a 5 year cycle, due to the Novel H1N1 Pandemic beginning in 2009 the CDC extended the cycle by one year. Additionally, supplemental funds were distributed by CDC for preparedness and response to the Novel H1N1 Influenza Pandemic. Therefore, this report will detail the spending over the past 2 years for PHEP and H1N1 funding but activities reported will be for the budget year of Aug. 10, 2010 to August 9, 2011 only.

Mission

Ensure communities are prepared to respond to natural and man-made public health disasters and emergencies through proactive planning and preparation.

Vision

A resilient and prepared Wyoming with communities able to respond to and recover from public health emergencies

Funding covered in this Annual Report:

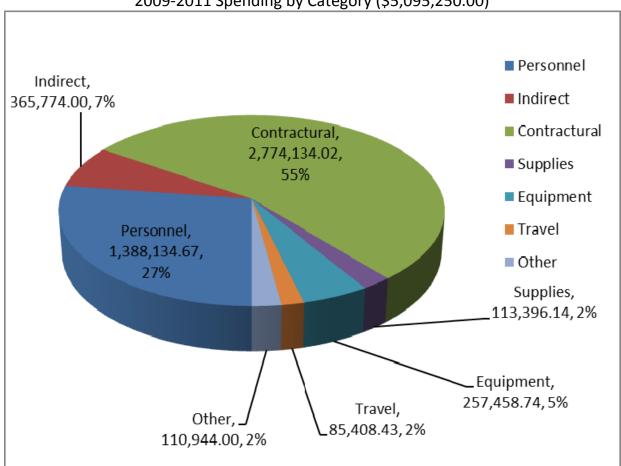
PHEP Funding received from the CDC:

- August 10, 2009- August 9, 2011: \$5,095,250
 - o \$200,000 of the total was specified for Cities Readiness Initiative
 - o \$95,250 was approved carryover from the 2008-2009 budget year
 - CDC authorized a 1 year no cost extension for the funding received on August 10, 2009
- August 10, 2010- August 9, 2011: \$5,000,000
 - o \$200,000 of the total was specified for Cities Readiness Initiative

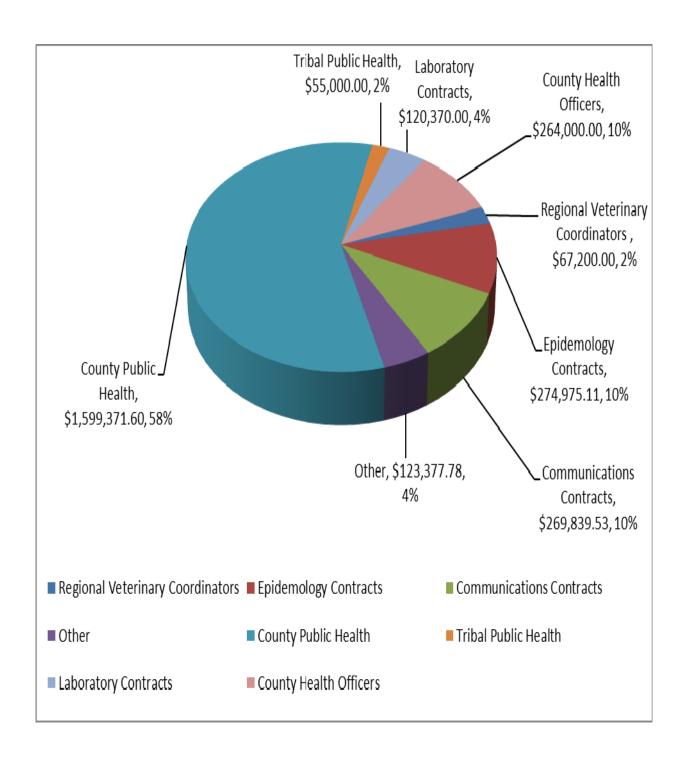
Novel H1N1 Influenza Funding received from the CDC:

July 31, 2009- July 30, 2011: \$5,466,412

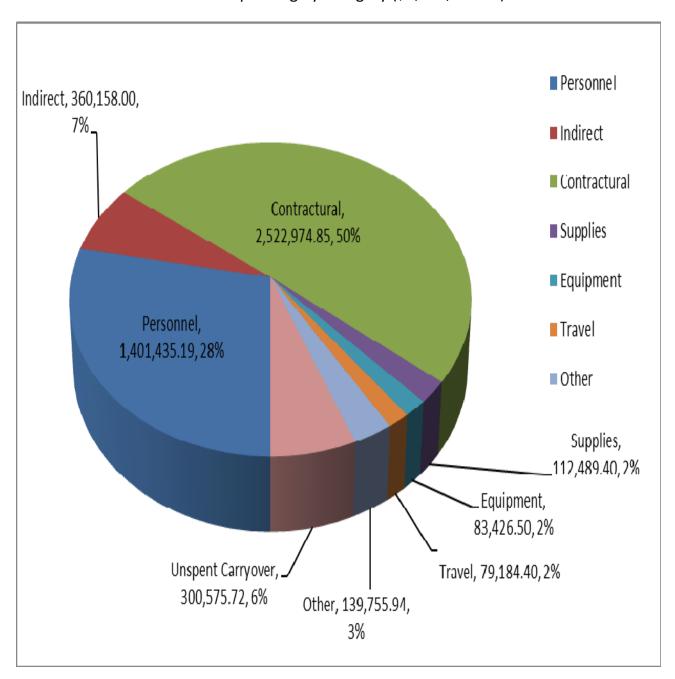




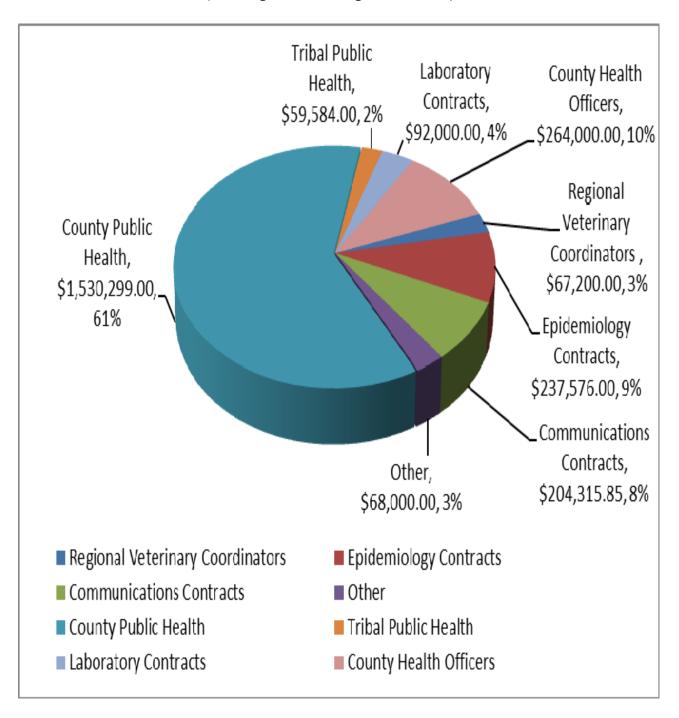
Summary of 2009-2011 PHEP Contracts at \$2,774,134.02 (Funding received August 10, 2009)



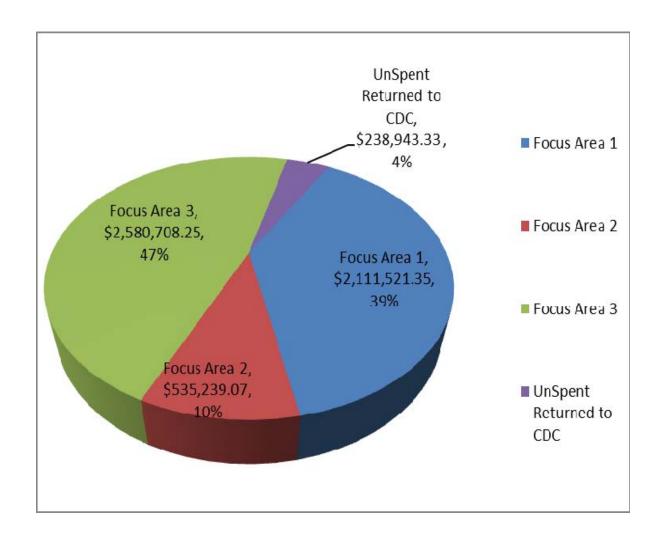
2010-2011 Spending by Category (\$5,000,000.00)



Summary of 2010-2011 PHEP Contracts at \$2,522,974.85 (Funding received August 10, 2010)



2009-2011 Expenditures for Novel H1N1 Influenza and pandemic influenza preparedness and response (\$5,466,412)



H1N1 expenditures for the 2 year cooperative agreement (CDC allowed movement of funds between focus areas so original allocations were modified):

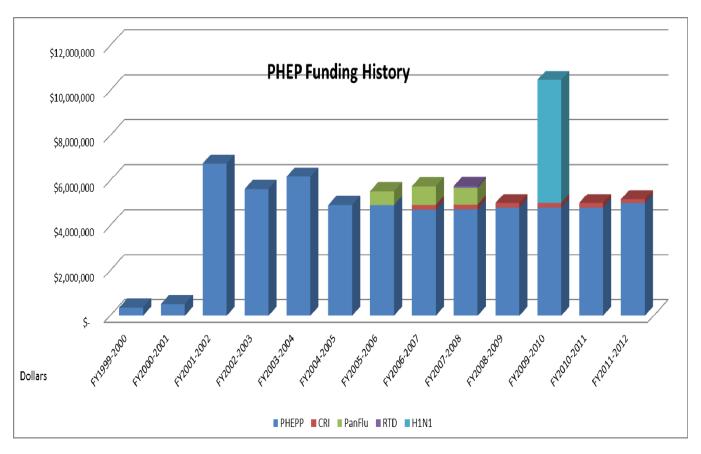
- Focus Area 1: Planning activities for vaccination, antiviral distribution/dispensing and administration, risk communication, and community mitigation
- Focus Area 2: Planning activities for laboratory, epidemiology and surveillance
- Focus Area 3: Response activities for the implementation of the 2009 H1N1 influenza mass vaccination campaign

Note: For July 31,2010- July 30, 2011 CDC changed funding scope to be general to pandemic influenza planning and response rather than H1N1 specific

Funding History

Funding Descriptions:

The Wyoming Department of Health first received funding for bioterrorism preparedness in 1999. The graph below summarizes the funding that has been received by the WDH since 1999.





- PHEP- Public Health Emergency Preparedness Funding, previously known as Bioterrorism
 - **CRI-** Cities Readiness Initiative Funding, pass through funding to Cheyenne Laramie County Health Department and Casper Natrona County Health Department
- PanFlu- Pandemic Influenza Preparedness Funding, 3 year supplemental funding
 - **RTD-** Real-time Disease Funding, one time supplemental funding that supported work with the Regional Poison Control Center
- **H1N1-** One time supplemental funding made available for planning and response to the Novel H1N1 Influenza Pandemic in 2009-2011

Summary of Program Accomplishments from August 9, 2010 through August 10, 2011:

WYOMING ALERT AND RESPONSE NETWORK (WARN)- WYOMING HEALTH ALERT NETWORK (WyHAN)

During this budget period the Wyoming Department of Health (WDH) successfully completed the certification process for Direct Alerting and Cascade alerting utilizing the Wyoming Health Alert Network (WyHAN). WyHAN is a collaborative work environment where sensitive or confidential information may be securely shared with our public health partners and emergency responders. It also establishes and maintains partner alerting tools that can notify our partners utilizing email, pager, fax, portal delivery, and text-to-voice messaging via telephone or cell phone for notification from the Health Alert Network and Volunteer Registry systems. In the WARN contact directory, people are designated by functional role, not by name or title. That way, instead of having to remember hundreds of names, ever-changing titles and fluctuating organizational structures, users can search for the right individuals to contact by other more intuitive means. The WyHAN system is used for public health messages, Amber Alerts, and to notify individuals to assemble in response to public health events or incidents.

Cross-jurisdictional alerting is the ability to issue an alert to people or entities outside the State of Wyoming, for example, another state health department or federal partners. From the <u>PHIN</u> <u>Communication and Alerting (PCA) Guide</u> "Two possible methods exist for sending alerts across jurisdictional boundaries: direct alerting and cascade alerting.

<u>Direct alerting</u> is the normal process in which an alerting system delivers an alert to a human recipient. This is the normal mode of alerting when the recipient works within the organization or its jurisdiction. However, direct alerting can also be used to accomplish cross-jurisdictional alerting: an alerting system in one jurisdiction sending messages to recipients within another jurisdiction.

<u>Cascade alerting</u> is a process in which an alert is sent as a system-to-system message from one jurisdiction to another; the receiving system then distributes the alert to the appropriate recipients within the receiving jurisdiction. The message contains the alert along with parameters describing how and to whom the message should be delivered. Cascade alerting is the preferred method for sending cross-jurisdictional alerts because it allows PHIN partner organizations to better control public health alerting within their jurisdiction. The capability to send and receive cascade alerts is therefore a PHIN requirement.

Communication and Situational Awareness

PHEP maintains a multi-use Emergency Operations and Communications Center (EOCC) focused on the coordination of resources, and the tracking of emergency events and response activities.

The EOCC utilizes a variety of electronic resources to accomplish its purpose to aid and facilitate local entities in managing emergency public health issues that exceed/overwhelm local resources. The EOCC coordinates and facilitates the search and deployment of public health resources and other emergency response activities between local, State, Federal and private entities. Partners include the Wyoming Office of Homeland Security, National Guard, law

enforcement, executive and administrative leadership for the State. The center facilitates the deployment of Strategic National Stockpile (SNS) and other medical materials, personnel and other resources to an emergency site and will track the incident response, etc.

The EOCC is managed by a designated manager, deputy manager and select personnel assigned to computer/phone and radio stations with 24/7 operation accomplished by identification and assignment of a cadre of staff from WDH Divisions, Agencies and Programs. Work station assignments may include dedicated land line, cell and satellite phone, computer and FAX/printing terminals, a variety of commercial and amateur radio communication equipment, active video, and mapping stations to verify deployment of resource to local and distant sites within the State.

2010-2011 EOCC Activity

- Activated for state level Functional SNS Exercise
- Placed on stand by for 2011 fires and floods
- Placed on stand by for suspicious powder events
- Conducted 6 drills designed to train EOCC personnel in realistic conditions
- o Supported local level exercises for Albany and Teton County

Exercises

PHEP provides support, guidance, technical assistance, and will serve as a model for implementation at the state, local, and tribal public health levels for exercises. The exercise program develops emergency-ready public health departments by upgrading, integrating and evaluating state and local public health jurisdictions through drills and exercises which will validate state, local, and tribal Public Health Emergency Operations Plan.

2010-2011 Exercises and Drills

- "Prairie Schooner" which was a four day state level Strategic National Stockpile Functional Exercise.
- Strategic National Stockpile Alternate RSS site drills.
- o WDH Emergency Operations and Communication Center Drills.
- o Strategic National Stockpile Communication Specialist Drills.
- o Strategic National Stockpile tabletop exercise with SNS partners.
- o Earthquake tabletop exercise "Bear River 7.0" with Emergency Preparedness Partners.
- Radiological tabletop exercise at the annual Public Health Response Coordinator Conference.
- Smallpox tabletop exercise during Public Health and Hospital Emergency Preparedness Training Summit

Training

During 2010-2011 through the work of the Emergency Preparedness Outreach Technician and expanding the use of technology the PHEP training program was able to make significant strides developing and delivering various types of training to state, local, and tribal partners.

During 2010-2011 over 555 Learners accessed training through the Learning Management System (LMS) WY-TRAIN, with over 9,380 Course Registrations between August 1, 2010 and August 7, 2011. This

training was conducted through onsite/live events, webinars, and online courses. This was accomplished through coordination and collaboration with other WDH programs and state agencies including Public Health Nursing, the Wyoming National Guard, WDH Human Resources, Medicaid, Hospital Preparedness Program, Mental Health and Substance Abuse Division, and the Public Health Lab.

During 2010-2011 a new training program for WyHAN was developed and presented around the state by the Emergency Preparedness Outreach Technician. During the last year 80 WyHAN training sessions were conducted with 370 people being trained of those 221 were new WyHAN users.

In order to reduce training and travel expenses PHEP expanded it's use of technology and developed "TEPINAR Training" which is "*Training, Exercise, Planning, Improvement*" webinar. Training during the last year included:

- National Exercise Schedule (NEXS)
- o SNS 101
- SNS Inventory Management
- o CHEMPACK
- Wyoming Alert and Response Network (WARN)
- Bed Tracking
- Public Health Lab Biological Sample Collection
- o Exercise Planning and Design
- o Virtual Situation Awareness Tool (VSAT)
- After Action Report and Improvement Plan Writing (AAR/IP)
- Using Exercise Evaluation Guides (EEG's)

Other trainings during 2010-2011 include:

- Summer Institute at the Northwest Center for Public Health
- Regional Institute for Health and Environmental Leadership's (RIHEL) Advanced Leadership
 Training Program (ALTP).
- NIMS/ICS Training
- o CHEMPAK
- Learning Management System Administrator/Course Manager Training
- o Participation in Northwest Center for Public Health Hot Topics
- Extensive training around the state on the three components of WARN (WyHAN, WYeROLL, and Wyoming Hospital Bed Tracking System)

Epidemiology and Surveillance

PHEP epidemiologists work closely with the Infectious Disease Epidemiology Program (IDEP) and are responsible for investigations of bioterrorism agents (Anthrax, Plague, Tularemia, Brucellosis, and Q fever), many of which are endemic in Wyoming, and assist with outbreak investigations, pandemic influenza response, environmental hazard investigations, natural disaster response, and fieldwork for investigation purposes. They also work with IDEP and the Wyoming Public Health Laboratory (WPHL) on suspicious powder response.

The surveillance systems that PHEP Epidemiologists utilize include NEDSS, EpiCenter, BioSense, National Retail Data Monitoring System, and Nebraska Regional Poison Control. The National Electronic Disease

Surveillance System (NEDSS) is an internet-based infrastructure for public health surveillance and data exchange. Fax and telephonic reports of BT agents, vaccine preventable diseases, food and water-borne diseases, some vector-borne and zoonotic diseases are entered into NEDSS. WDH receives electronic lab reports from Mayo labs, LabCorp, and WPHL into NEDSS. EpiCenter is a syndromic surveillance system housed by Health Monitoring Systems (HMS) which analyzes hospital emergency room data from 9 of Wyoming's largest hospitals and 1 urgent care facility. BioSense is a syndromic surveillance system managed by CDC that provides Wyoming data from 1 Department of Defense (DOD) facility, 9 Veteran's Affairs (VA) facilities, 3 hospitals, 19 laboratories, and 107 pharmacies (prescription based). The National Retail Data Monitoring System (NRDMS), managed by the University of Pittsburgh, Real-Time Outbreak and Disease Surveillance Laboratory (RODS), is a tool that collects and analyzes daily sales of select Over-the-Counter (OTC) medications and products from pharmacy retailers nationally. Currently, 72 Wyoming pharmacies participate in the system and provide daily surveillance data to the NRDMS. The Nebraska Regional Poison Center (NRPC) operates 24 hours a day, seven days per week, and is staffed by a certified team of registered nurses and physicians. The NRPC sends daily human surveillance reports and weekly animal disease and event logs to the WDH State Epidemiologist and the WDH Public Health Veterinarian for analysis. From August 1, 2010 through July 30, 2010, NRPC received 8,663 calls from Wyoming for the following reasons: 4,637 unintentional, 753 intentional, 45 other, 133 adverse reactions, 2,882 poison and drug information, and 213 animal exposures.

PHEP epidemiology also maintains systems that assist with notification and information exchange during an event that requires a rapid epidemiology response. These systems are Epidemic Information Exchange Program (Epi-X) and the Public Health Emergency Response Line. Epi-X is a secure CDC system, which is designed to rapidly notify public health officials of outbreaks and other acute health events including terrorism, as they are identified and investigated. Wyoming Epi-X members receive daily sensitive national and/or international disease reports and event messages from the CDC. Currently, 29 Wyoming health officials have access to the system. The 24/7 Public Health Emergency Response Hotline (888-996-9104) was established for agency, healthcare partners, interagency response partners and Wyoming citizens to contact the WDH in a public health emergency. The hotline is staffed on a rotating basis by PHEP and IDEP Epidemiologists who take week long 24/7 "Duty Epidemiologist" shifts. The WDH utilizes a virtual call center to manage calls to the public health emergency response hotline. There were 245 calls to the hotline from August 1, 2010 through July 30, 2011.

The Infectious Disease Epidemiology and Public Health Emergency Preparedness Programs publish a monthly Syndromic Surveillance and Notification Systems Report. These reports are intended to provide feedback to state and local public health officials. This report includes data from our syndromic surveillance systems (EpiCenter, BioSense, and NRDMS) and notification systems (Epi-X, emergency response line, and NRPC) for the previous month, and is presented in text, chart and anomaly calendar formats.

Bioterrorism Response Laboratory (BRL)

Testing capabilities within the Laboratory Response Network (LRN) include active participation in the Select Agent Program, in conjunction with Wyoming's Sentinel Laboratories across the state. Within the Wyoming Bioterrorism Response Lab (BRL), equipment is maintained to meet preparedness response in case of natural or intentional events. The BRL uses LRN reagents and protocols. Reagent levels and current protocol are available to meet preparedness response in case of natural or intentional events.

The state's courier services all 23 counties in the state and transports samples to the Wyoming Public Health Lab. The courier also delivers supplies to the labs as needed. The service greatly improves turnaround times by shortening the time of receipt of specimens. The courier provides 24/7 service, which is available for emergencies. The courier service has also been involved in testing of Sentinel Clinical Laboratories' (SCL) ability to ship specimens nights, weekends, and holidays.

The BRL successfully conducted a spiked sample exercise with the 84th Civil Response Team (CST). The BRL developed spiked samples for molecular testing. Methodologies between the BRL & CST were compared to determine the capability of reproducing the same results. Exercise collaboration will continue as schedules allow.

The BRL continues a major focus on the Sentinel Clinical Laboratories. Within this timeframe we held the workshop, Transportation of Infectious Substances in August of 2011. This mandatory training hosted 21 attendees from 13 Wyoming Facilities. Labs that could not attend but still require this training are directed to the State of Oregon's website, which offers a training module for packaging and shipping infectious substances. This module meets the mandatory requirements for packaging infectious substances for shipment by commercial carriers.

The BRL supplies Clinical Laboratory Standards Institute (CLSI) Documents to SCLs, which are used to achieve compliant operation in a clinical laboratory. In this time period the program fulfilled 43 CLSI document requests to 14 Wyoming Facilities in the spring of 2011. Distribution of CLSI M100-S21, Antimicrobial Susceptibility Testing Guidelines to all hospital facilities in the state is of upmost importance. Requests for extra M100 documents for the facility's Infection Prevention Staff were provided. Once the M100's were distributed, webinar training state wide provided instructional guidance on the use of this document with emphasis on accuracy of susceptibility results, timeliness of reporting, and ethical stewardship to patients in hospital facilities. The webinar reached 37 attendees from 10 facilities.

The BRL utilizes the College of American Pathologists Laboratory Preparedness Exercise (CAP-LPX), a proficiency test that focuses on the Select Agent Program, to assess sentinel labs' ability to rule out/refer agents of bioterrorism. Thirty-three of thirty-six labs participate, including our partner, the State Veterinary Laboratory in Laramie. The BRL is now including shipping exercises and testing courier services with this exercise with the goal of reaching all SCL's in future years. During this budget year, the BRL tested six lab's ability to appropriately package infectious substances, including Evanston (Uinta County), Jackson (Teton County), Laramie (Albany County), Cody (Park County), Cheyenne (Laramie County), and Newcastle (Weston County).

A Database of Sentinel Clinical Laboratory Contacts is continually maintained and updated. This database includes facility name, contact information, level of biosafety at which the facility operates, accreditation agency, and the SCL's reference lab information. The Lab Database is updated at least twice a year and as needed throughout the year.

The BRL staff participates in mandatory LRN exercises/proficiency tests. The biological exercises in 2010 – 2011 included Small Pox and Multi Agent Panel including Ricin, *Bacillus anthracis, Yersinia pestis, Francisella tularensis,* and *Burkholderia* species. All proficiency testing has been successfully passed to date. The BRL staff also successfully participated in Chemical Terrorism Packaging and Shipping exercises/proficiency tests.

The BRL moved into the New Combined Laboratories Facility, which includes a Biosafety Level 3 (BSL III) Select Agent Laboratory. Occupancy of the new facility for the Public Health Laboratory and Chemical Testing Laboratory took place in November of 2010. The BRL was required to wait for the commissioning report to set an inspection date with the CDC for the new BSL III facility. The commissioning report was received in March of 2011. The CDC inspection was set and the BRL was inspected in July of 2011 and passed inspection. The BRL moved in October of 2011. As part of the preparation for inspection the BRL staff developed and wrote new Biosafety, Biosecurity, and Incident Response plans for the new facility. Training is ongoing on the new plans, focusing on entry and exit procedures for the BSL III.

The Combined Laboratories Facility also includes a new Training Laboratory with wet lab capabilities. In the future, the training lab will be utilized for in-house training, meetings and external training through webinars.

Electronic Lab Reporting

Public Health Information Network (PHIN) guidelines include requirements for electronic lab reporting (ELR). ELRs create a more streamlined reporting process for notifiable diseases from the WPHL to IDEP. This streamlined report decreases the amount of time the laboratorians spend submitting reports to the epidemiologists and it would also provide a more rapid response for notifiable disease investigations. The applications used to complete this project were STARLIMS, Orion Rhapsody, National Electronic Disease Surveillance System (NEDSS), and PHIN Messaging Service (PHINMS). The route ELRs use start in the laboratory using STARLIMS which records the ELR in Rhapsody, which converts it from an XML file to a HL7v.2.3.1. That message is encrypted and sent using PHINMS to Computer Sciences Corporation's (CSC) PHINMS route, which sends it to Rhapsody to be converted into a NEDSS ELR for epidemiology. This goal of electronically sending all notifiable disease lab reports performed by the WPHL from STARLIMS into NEDSS was met in July 2011. The ELR work was done collaboratively between the PHEP Epidemiologist and Health Informatics Specialist, IDEP, WPHL, STARLIMS, and CSC. A SharePoint site was established for this project, which proved to be an effective method to ensure information sharing and project tracking. WDH can now successfully exchange seventy-two (72) types of lab results.

Regional Veterinarian Coordinator Program and Animal Disaster Preparedness

The Regional Veterinary Coordinators (RVCs) conduct weekly active surveillance among veterinary clinics and other information sources for zoonotic diseases and other adverse health events in animals that could impact public health. The reporting of confirmed or suspected animal cases involving a potential agent of bioterrorism is strongly encouraged. Other adverse health events reported through the

surveillance system include environmental exposures, poisonings, undiagnosed illness syndromes, wild animal die-offs, and injuries. Information collected by the RVCs is reported to the state public health veterinarian and staff who compile this information into weekly, monthly and yearly summaries. The summaries are widely distributed throughout the state and are also available at the PHEPP website at http://wdh.state.wy.us/sho/hazards/wrvc.html.

From August 2010 through July 2011, a total of 1,198 reports were received through the surveillance program. An average of 36 veterinary clinics reported information each week. A majority (667) of the reports involved animal bites and other potential rabies exposures to humans. Also commonly reported were animal cases (and human cases where an animal was the likely source) of campylobacter (79) and salmonella (23). Cases of giardia (43) and other internal zoonotic parasites (44) in animals were also reported. Reports of confirmed or suspected animal cases involving a potential bioterrorism agent included cases of anthrax (moose), plague (dog, coyotes), brucellosis (bovine), botulism (dog, horse), and Q fever (goat).

The RVCs also assisted with numerous field investigations and interventions. These activities included helping with preparedness and response activities related to flooding in Regions 1 and 4. RVCs were also called upon to assist in responding to outbreaks of *Chlamydophilia psittaci* in pet store birds, campylobacteriosis in cattle and dogs, and rabies in bats.

The RVCs continue to coordinate local planning for animal disasters where there may be public health implications. The RVCs are active participants of Local Emergency Planning Committees in many counties. The RVCs also participate as animal disaster subject matter experts on Wyoming Office of Homeland Security Emergency Response Teams in their respective regions. Some of the recent preparedness activities have included helping a county develop plans for a mobile animal rescue and shelter system, assisting in the recruitment of veterinarians to the Wyoming Veterinary Reserve Corps, and helping distribute "go bags", duffle bags containing PPE and other emergency response supplies, to County Veterinarians and other members of the Veterinary Reserve Corps.

Emergency preparedness exercises and trainings that RVCs participated in and/or helped coordinate included a CBRNE animal decontamination class at the Jackson Hole Veterinary Rendezvous, An Agriculture and Food Vulnerability Assessment Training in Cheyenne and Riverton, the FEMA sponsored Great Central Shakeout National Level Exercise, an Animal Disease Response Training (AWR-206-1) held in Sundance, Basic Agricultural Emergency Response Training for CBRNE Incidents (AgERT-B) at the Center for Domestic Preparedness in Anniston, Alabama, and several local white powder (anthrax) exercises.

The RVC program continues to receive requests for presentations about information collected through disease surveillance with talks given at the Wyoming State Fair, to a University of Wyoming epidemiology class, and to a University of Wyoming pre-veterinary club.

Planning

During the budget period, the Planning Section continued to refine current plans to ensure compliance with current Federal and State requirements and ensure full operability by WDH staff and partner organizations. Plan updates have also been incorporating recent WDH organizational changes.

The WDH has joined with the Wyoming Military Department, Wyoming Department of Transportation, Wyoming Livestock Board and the Wyoming Office of Homeland Security to continue the State Planning Group. These agencies form the core response organization to many Wyoming disasters. The intent is to coordinate planning before an incident. Other Executive Branch agencies will be brought into the mix as warranted by plans that are being reviewed, updated or created.

Strategic National Stockpile (SNS)

The State of Wyoming received a 98% preparedness rating for SNS from the Centers for Disease Control and Prevention (CDC) in November 2010. Cities Readiness Initiative (CRI) SNS scores for the 2010-2011 year were: Laramie County 68% and Natrona County 54%.

The PHEP program, in cooperation with numerous partner agencies; substantiated the capability of Wyoming's alternate Receive Stage and Store (RSS) facility through a series of drills, site updates/preparations and purchases of additional material handling equipment.

The WDH participated in two full-scale medical countermeasures (MCM) dispensing exercises; Operation Golden Eagle and Operation Ethete, in order to demonstrate the State's ability to distribute MCM from the SNS to county/tribal health agencies.

In 2011, the WDH/PHEP program began evaluating all 21 county health agencies on their SNS planning efforts and progress utilizing the same technical assistance review (TAR) process and tools as the CDC utilizes in evaluating preparedness in designated Cities Readiness Initiative (CRI) locations nationwide (Natrona and Laramie Counties are designated as CRI therefore they are not reported here). Seven of these county reviews were actually conducted as site visit reviews involving partner agencies as well. These site visits proved to be an invaluable learning tool for public health; both at the state and county level, as well as for local law enforcement, hospitals, county health officers, nurse managers and local emergency managers. Following are summary scores for the 21 counties reviewed under the TAR during this budget year:

Range of County SNS Scores: 3.7% to 92.4% Overall County SNS Average Score: 54.9%

CHEMPACK:

In 2010 and 2011, the PHEP mandated each county to conduct a CHEMPACK request tabletop exercise involving numerous partner agencies in each county. The PHEP program, in collaboration with the Wyoming 84th Civil Support Team conducted numerous CHEMPACK/Nerve Agent trainings statewide for first responders, public health, hospitals and regional response teams.

Inventory Management System:

PHEP provided training for county Public Health Response Coordinators (PHRC) in the use of the Strategic National Stockpile Inventory Management System (SNS IMS). The enhancements requested by the PHRCs were great ideas, and have been incorporated into an updated version of IMS.

Summary of County Public Health Emergency Preparedness Progress

County Public Health Response Coordinators (PHRC) are the primary position responsible for carrying out the contract deliverables identified by WDH PHEP. There is at least one person identified as the

public health response coordinator in every county and the position is based in the county Public Health Office. Under the supervision of a pubic health nurse manager, they work with state and county public health nursing staff and other local partners identified in the county to address all hazards planning, exercises and training for public health emergencies. Partners include hospitals, EMS, emergency management, law enforcement, elected officials, schools, healthcare facilities, and other entities. During the county contract period of October 2010 through September 2011 all counties (23) met the following deliverables:

- Conducted Crisis Emergency Risk Communication, CHEMPACK and Real Opt exercises/drills and completed after action reports
- Completed quarterly communication (WARN and radio) drills
- Coordinated with their county emergency manager, hospital and other county partners to include people unable to self evacuate in their planning
- Updated and submitted county Strategic National Stockpile Plans
- Were successfully contacted by PHEP representatives on two separate occasions during non working hours

Coordination with Hospital Preparedness Program



In the past year we have started a strong marketing campaign to recruit volunteers and agencies to join Wyoming's Enrollment, Response, Operations, Logistics - Let's Enroll (WYeROLL) system. During the budget year we raised our volunteer numbers from 137 to 372 and expanded our volunteer groups to 59. We have partnered with the American Red Cross, Volunteer Organizations Active in Disasters (VOAD) and the Medical Reserve Corps (MRC) to use WYeROLL as their volunteer management system. As part of our marketing campaign we have teamed up with the University of Wyoming Athletics to display and promote WYeROLL to all listeners and athletic enthusiasts. We have also contracted with various media outlets to promote to all Wyoming communities. We have placed information about WYeROLL in the Wyoming Nurse Magazine, cinema, newspapers, medical association newsletters, and many more and attended conferences to promote and recruit various medical and non-medical volunteers. Through our continuous efforts to help Wyoming prepare we have seen an increase of volunteer activity.

For more information about WYeROLL please visit http://www.wyeroll.org or for ESAR-VHP please visit http://www.phe.gov/esarvhp.



HAvBED - Bed Tracking

Wyoming HAvBED System - Bed Tracking System is maintained by the Hospital Preparedness Program (HPP). This system tracks the available bed counts in all Wyoming hospitals. We have worked with each hospital to keep the system updated and train Hospital and public health personnel in the HAvBED program. We have seen increased participation and are currently in the process of adding all the Nursing Homes in the State of Wyoming to the bed tracking system.



Medical Reserve Corps – MRC

Wyoming has been promoting the Medical Reserve Corps to counties around the State. We currently have three (3) active MRC Units in Northwestern Wyoming, Natrona County, and Albany County. We are working hard to create a presence in Wyoming for Medical Reserve Corps as these units would help Wyoming communities in various ways. The MRC units are registered in WYeROLL and utilize the registry for volunteer management. For more information visit http://www.medicalreservecorps.gov

Planning for those 'Unable to Self Evacuate' (UTSE):

The Hospital Preparedness Program and PHEP are members of the Unable To Self Evacuate (UTSE) Core Advisory Group which includes members from Laramie County Emergency Management, University of Wyoming, Wyoming Institute for Disabilities (WIND), Wyoming Independent Living Rehabilitation, Wyoming Office of Homeland Security, Albany County Public Health, WDH Senior Services, Wyoming Red Cross and consumers. Presentations were conducted by Core Advisory Group members throughout the year to consumers, service providers and first responders to provide training on the need to include UTSE in planning and to provide emergency preparedness training. A primary accomplishment for the year has been the distribution of approximately 2500 UTSE bags to service providers that are providing the bags and emergency preparedness training to people who are UTSE. The groups that are handing out bags currently include: WDH Developmental Disabilities programs, WDH Senior Services programs, Wyoming Independent Living Rehabilitation, Wyoming Services for Independent Living, County Public Health agencies, and WIND.

Strategic Planning:

In April 2011, the WDH PHEP, undertook a strategic planning process. The process followed the CDC's *Public Health Preparedness Capabilities: National Standards for State and Local Planning* document, which provided a recommended process for identifying past successes and future challenges.

PHEP staff assessed the program's current state of preparedness. We began this process by summarizing what we do, who we do it for, and how we do it, with our focus on how we have accomplished or built some of the capabilities through prior efforts in addressing the preparedness goals: Prevent, Detect and Report, Investigate, Control, Recover, and Improve.

PHEP convened a Strategic Planning Team consisting of internal and external partners from WDH Emergency Preparedness Advisory Committee to participate in the one day strategic planning event. The planning team's responsibility was to prioritize the sixty-five (65) functions and align within a five-year plan.

After completing our draft strategic planning process, our next step was activity planning for short-term goals. Development of a state and local Hazard Vulnerability Assessment (HVA) is one of our first goals. PHEP will work with the Wyoming Office of Homeland Security to ensure inclusion of public health risks in the state Hazard Mitigation Plan or utilization of a public health hazard and vulnerability assessment tool.

In summary, by assessing our current state, determining goals, and developing plans PHEP has taken the fifteen capabilities and developed a five-year plan that will help assure the program is able to perform specific functions within each capability. PHEP has made tremendous progress in public health disaster planning, training, exercise, communication, disease surveillance, laboratory testing and response since the inception of bioterrorism funding. This progress can be seen in the accomplishments of the Strategic National Stockpile program, the public health laboratory, epidemiology and surveillance, exercise development, interoperable communication, planning, responses to emergencies, and numerous other programs within the state of Wyoming. This strategic plan will enable PHEP to focus resources and track progress on identified priority areas during the next five years.

For more information regarding our Five Year Strategic Plan, please see PHEP Five Year Strategic Plan
2011-2016 (http://www.health.wyo.gov/sho/hazards/index.html).

Public Health Emergency Preparedness

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Websites

Wyoming Department of Health: http://www.health.wyo.gov/

Public Health Emergency Preparedness Program:

http://www.health.wyo.gov/sho/hazards/index.html